PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 × COMMITTEE (in full) over the lines. is changed) JACKSON LEWIS P.C. POLITICAL ACTION COMMITTEE ONE NORTH BROADWAY ADDRESS (number and street) 14th FLOOR (Check if address is changed) WHITE PLAINS 10601 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS schlossw@jacksonlewis.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2013 C00482570 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. WILLIAM A SCHLOSSER Type or Print Name of Treasurer WILLIAM A SCHLOSSER [Electronically Filed] 12 03 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

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